

S0215 - M58

EXHIBIT 2

CONFIDENTIAL

S0215 - M59

CVS/caremark**Invoice Summary**

CNC MEDICAID TRADITIONAL- BUCKEYE MEDICA
ATTN: GENERAL A/P INBOX

Remit To:

CVS/caremark
Bank of America
ACH/EFT ABA# 121000358
Bank Account # 12330-09797
Wire ABA #026009593
PLEASE INDICATE CUSTOMER CODE ON PAYMENT

Invoice Number: 52295567
AR Number: 5434
Invoice Group:
Customer Code: A5434
Invoice Date: 09/16/2018
Period Covered: 09/08 - 09/15
Payment Due On: 09/22/2018

CLAIMS	Quantity	Cost	Copay	Amount Due
RETAIL	103,023	4,744,876.04	0.00	4,744,876.04
PAPER	2	91.98	0.00	91.98
SPECIALTY PHARMACY	757	2,378,956.77	0.00	2,378,956.77
SUBTOTAL				7,123,924.79
 MISCELLANEOUS				
CREDIT-RETAIL				(127,677.50)
SUBTOTAL				(127,677.50)
 INVOICE TOTAL				6,996,247.29

IF YOU HAVE ANY QUESTIONS PLEASE CALL Cherie Fromm AT 972-619-8163
cherie.wesling-fromm@caremark.com

To the extent required, you agree to fully and accurately disclose and report any discount received from us, whether reflected in the above charges or otherwise provided to you, as a discount against the price of the drugs in any reporting to government health care programs.